



Departmental Quarterly Performance Report

Department Name: Office of Safe Neighborhood Parks

**Reporting Period:
FY 04/05
2nd Quarter**

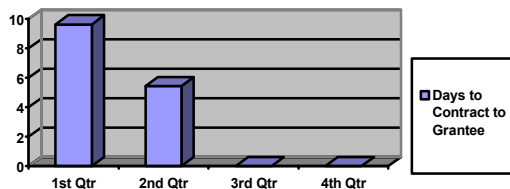
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MAJOR PERFORMANCE INITIATIVE

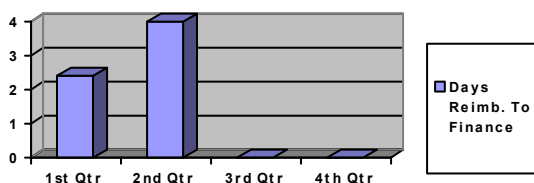
Describe Key Initiatives and Status

RC-1 Draft grant agreements and amendments within 6 days of authorizing action to ensure timely execution.



**Department did not meet its performance objective this quarter due to annual leave taken and a vacancy in the 1st month of the quarter.*

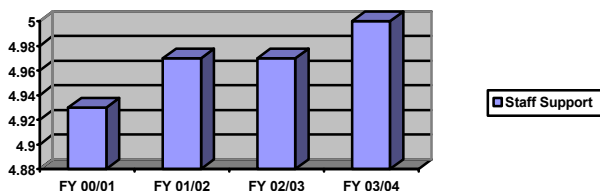
RC-1 Provide accurate and timely payments for grant reimbursement. Upon receipt of complete & accurate request submit to Finance within 5.5 days.



☒ Strategic Plan
☒ Business Plan
☐ Budgeted Priorities
☒ Customer Service
☐ ECC Project
☐ Workforce Dev.
☐ Audit Response
☐ Other _____
 (Describe)

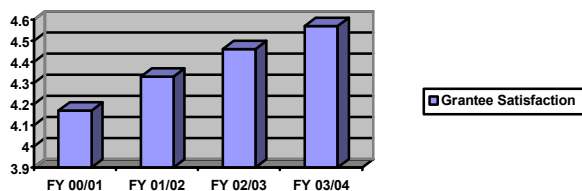
☒ Strategic Plan
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☐ Audit Response
☐ Other _____
 (Describe)

RC-1 Submit an annual survey to SNP COC members asking them to rate staff's performance. Achieve a satisfaction rating of 5.0 for staff support/service by the Oversight Committee members (where 1 = unsatisfactory and 5 = excellent).



☒ Strategic Plan
☒ Business Plan
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☒ Customer Service
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☐ Audit Response
☐ Other _____
 (Describe)

RC-1 Submit an annual survey to Grantee liaisons asking them to rate staff's performance. Achieve Grantee satisfaction rating of 5.0 (where 1 = unsatisfactory and 5 = excellent).



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 (Describe)

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PERSONNEL SUMMARY

A. Filled/Vacancy Report

NUMBER OF FULL-TIME POSITIONS*	Filled as of September 30 of Prior Year	Current Year Budget	Actual Number of Filled and Vacant positions at the end of each quarter							
			Quarter 1		Quarter 2		Quarter 3		Quarter 4	
			Filled	Vacant	Filled	Vacant	Filled	Vacant	Filled	Vacant
	4	4	4	0	4	0				

* Public Safety Departments should report the sworn versus non-sworn personnel separately and Departments with significant part-time, temporary or seasonal help should report these separately.

Notes:

B. Key Vacancies

None

C. Turnover Issues

NONE

D. Skill/Hiring Issues

NONE

E. Part-time, Temporary and Seasonal Personnel

(Including the number of temporaries long-term with the Department)

OSNP funds one (1) Clerk III in Miami-Dade County Park & Recreation Department up to \$24,000.

F. Other Issues

NONE

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FINANCIAL SUMMARY

(All Dollars in Thousands)

	PRIOR YEAR Actual	CURRENT FISCAL YEAR						
		Total Annual Budget	Quarter		Year-to-date			
			Budget	Actual	Budget	Actual	\$ Variance	% of Annual Budget
Revenues								
♦	450,836	420,181	105,045	101,306	210,090	185,054	25,037	44%
♦								
♦								
♦								
Total	450,836	420,181	105,045	101,306	210,090	185,054	25,037	44%
Expense*								
Personnel	386,162	355,390	88,847	81,189	177,695	155,877	21,818	37%
Operating	64,674	64,791	16,198	20,117	32,396	29,177	3,219	7%
Capital	0	0	0	0	0	0	0	
Total	450,836	420,181	105,045	101,306	210,091	185,054	25,037	44%

* Expenditures may be reported by activity as contained in your budget or may be reported by category (personnel, operating and capital).

Equity in pooled cash (for proprietary funds only)

Fund/ Subfund	Prior Year	Projected at Year-end as of			
		Quarter 1	Quarter 2	Quarter 3	Quarter 4
380/38A	1,963,388	964,032	964,032		
380/38B	2,420,657	2,356,413	2,331,630		
380/38C	11,120,543	5,202,917	4,236,855		
380/38D	12,405,710	10,049,934	10,049,934		
380/38E	5,528,590	3,386,514	2,871,588		
Total	33,438,888	21,959,810	20,454,039		

Comments:

(Explain variances, discuss significant in-kind services, provide status of aged receivables at 30-60-90-+ days and those scheduled for write-off, if applicable)

- 1- Revenues drawn down only to cover expenses
- 2- Approximately 33% of all operation expenses are incurred in the 4th Quarter (general administration cost, annual audit, final rent expense, etc.).

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STATEMENT OF PROJECTION AND OUTLOOK

The Department projects to be within authorized budgeted expenditures and projects that available revenues will exceed expenses except as noted below:

Notes and Issues:

(Summarize any concern or exception that will prohibit the Department from being within authorized budgeted expenditures and available revenues)

NONE

DEPARTMENT DIRECTOR REVIEW

The Department Director has reviewed this report in its entirety and agrees with all information presented including the statement of projection and outlook.

Signature
Department Director

Date_____